# FORM.D

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** IFORM LIMITED OFFERING EXEMPTION OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2002 Estimated average burden hours per form.....16.0

SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						

03004686					

03004686		10	154	45	DA	TE RECEIVED	-/
Name of Offering (☐ check if this is an am Common Stock Offering	nendment and name has char	nged, an	nd indicate change.)				
Filing Under (Check box(es) that apply):	☐ Rule 504		☐ Rule 505	X Rule 506	☐ Section 4(6	) ULOE	
Type of Filing:		X	New Filing		Amendment		
	A. BA	SIC ID	ENTIFICATION D	ATA			
1. Enter the information requested about	the issuer						
Name of Issuer ( check if this is an amen	dment and name has change	ed, and	indicate change.)				
IXI Corporation		_				DDOOR	
Address of Executive Offices	(Number and	Street, (	City, State, Zip Code	) Telephone Number	(Including Area C	iodi) IJUULS	SED
6723 Whittier Avenue, Suite 403 McLean		_		(703) 848-38		_1	
Address of Principal Business Operations ( (if different from Executive Offices)	Number and Street, City, Sta	ate, Zip	Code)	Telephone Number	(Including Area C	Code) JAN 2 1 2	2003
						THOMSO	<b>1</b> A.C.
Brief Description of Business: Provider of web-based system available for	Brokers and Planners to targ	get pros	pective clients by the	eir investment potential.		FINANCIA	
Type of Business Organization							
<b>区</b> corporation	☐ limited partnership, alrea	ady forn	med	☐ other (pl	ease specify):		
☐ business trust	☐ limited partnership, to be	e forme	d				
Actual or Estimated Date of Incorporation of	or Organization:	_	Month 0	Year 93	Actual	☐ Estimated	
Jurisdiction of Incorporation or Organization	n: (Enter two-letter U.S. CN for Canada; FN fo			for State:		DE	

#### **GENERAL INSTRUCTIONS**

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

#### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Las	t name first, if individual)	· · · · · · · · · · · · · · · · · · ·							
Bayne, Stephen Business or Res	idence Address (Number and	Street, City, State, Zip Code)							
	tion, 6723 Whittier Avenue, S								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner				
Full Name (Las Barton, Samuel	t name first, if individual) G.								
	sidence Address (Number and tion, 6723 Whittier Avenue, S								
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner				
Full Name (Las Rodbell, Arthur	t name first, if individual)								
	sidence Address (Number and ation, 6723 Whittier Avenue, S								
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Full Name (Las Regan, Jay	t name first, if individual)	14							
	sidence Address (Number and ation, 6723 Whittier Avenue, S								
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Las Davidson, Simo	t name first, if individual) on								
	sidence Address (Number and tion, 6723 Whittier Avenue, S								
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Las Beveridge, Bria	t name first, if individual) in P.			,					
Business or Residence Address (Number and Street, City, State, Zip Code) c/o IXI Corporation, 6723 Whittier Avenue, Suite 403, McLean, VA 22101									
Check Boxes that Apply:	☐ Promoter	■ Beneficial Owner  ■ Compare the second of the second o	☐ Executive Officer	Director	☐ General and/or Managing Partner				
Full Name (Last name first, if individual) Covenant Partners, L.P.									
Business or Residence Address (Number and Street, City, State, Zip Code) 1150 First Avenue, Suite 600, King of Prussia, PA 19406									
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)									
Business or Re	sidence Address (Number and	Street, City, State, Zip Code)							

B. INFORMATION ABOUT OFFERING													
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												
2.	. What is the minimum investment that will be accepted from any individual?												
3.	Does the offering permit joint ownership of a single unit? Yes X No Yes X N										o		
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full	Name (Last	name first, if	individual)					<del></del>	·				
Eme	erging Grown	th Equities, L	td.		•								
		idence Addres e, Suite 600, l			-	Zip Code)							
Nan	ne of Associa	ated Broker o	r Dealer							<del></del>			
Jack	Freeman												
State	es in Which	Person Listed	Has Solicite	ed or Intend	s to Solicit	Purchasers		<del></del>					
(Che	eck "All Stat	tes" or check	individual St	ates)	••••	••••••				•••••			All States
[AL	]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT	]	[NE]	[NV]	[NH]	[X-NJ]	[NM]	[X-NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[X-PA]
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Last	name first, if	individual)										
	<del></del>		<del></del>		2	<del></del>					<del></del>		
		idence Addres		ind Street, C	ity, State, 7	Zip Code)							
Nan	ne of Associ	ated Broker o	r Dealer										
State	es in Which	Person Listed	l Has Solicite	ed or Intend	ls to Solicit	Purchasers							
(Che	eck "All Stat	tes" or check	individual St	tates)							·····		All States
[AL	]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[10]
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]	[]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full Name (Last name first, if individual)													
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)													
[AL	]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]	<u>[]</u>	[NE]	[NV]	[NH]	[[1]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SC]	[SD]	[TN]	[TX]	IUTI	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Amount Already Aggregate Offering Price Sold Debt ..... \$ 1,250,000 \$ 1,250,000 Equity ..... ☐ Preferred Common Convertible Securities (including warrants)..... Partnership Interests Other (Specify \_\_\_\_\_) \$ 1,250,000 Total \$ 1,250,000 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases \$ 1,250,000 Accredited Investors \$ 0 Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Sold Security Type of Offering Rule 505 ..... Regulation A Rule 504 ..... Total..... a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs \$ 5,000 Legal Fees ..... X

Accounting Fees

Other Expenses (Identify) Blue sky filing fees.

Total \_\_\_\_\_

X

\$ 63,000

\$ 1,150

\$ 69,150

C OFFINIS PROPERTY AND PROPERTY							
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer" \$1,180,850							
in response to Part C – Question 4.a. This difference is the "adjusted	gross proceeds to the issuer"	\$ <u>1,180,850</u>					
<ol> <li>Indicate below the amount of the adjusted gross proceeds to the issuer u If the amount for any purpose is not known, furnish an estimate and o payments listed must equal the adjusted gross proceeds to the issuer set f</li> </ol>	theck the box to the left of the estimate. The tot orth in response to Part C - Question 4.b above.	al of the					
	Payment to Of						
Salaries and fees	Directors, & A						
Purchase of real estate	<b></b>						
Purchase, rental or leasing and installation of machinery and equipment							
Construction or leasing of plant buildings and facilities	<b>-</b>						
Acquisition of other businesses (including the value of securities involved in	. — <u> </u>	പ ა					
in exchange for the assets or securities of another issuer pursuant to a merger)	🗖 \$						
Repayment of indebtedness	□ s	\$					
Working capital	□ s	<u> </u>					
Other (specify):	□ s	Ds					
Column Totals	_						
Total Payments Listed (column totals added)		\$ 1,180,850					
	· · · · · · · · · · · · · · · · · · ·						
D. FED	ERAL SIGNATURE						
		505 the fellowing signature constitutes					
The issuer had duly caused this notice to be signed by the undersigned duly an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conn-accredited investor pursuant to paragraph (b)(2) of Rule 502.							
Issuer (Print or Type)	Signature	Date					
IXI Corporation	JUN-M. 12	- 1/15/03					
Name of Signer (Print or Type)	Title of Signer (Print or Type)						
Stephen M. Bayne	Chief Financial Officer						

# ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)